CO (Inc	COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY Includes Reference to PCT International Applications)  ATTORNEY DOCKET NUMBER PHARMA-148					
As a	below nan	ned inventor, I hereby de	clare that:	*** .		
	My reside	nce, post office address	and citizenship are as state	ed below next to	my name.	
	I believe I names are	am the original, first and listed below) of the sub	sole inventor (if only one i	name is listed bel ed and for which	ow) or an original, first and joi a patent is sought on the inve	nt inventor (if plural ntion entitled:
	ENANTIO	OMERIC AMPHETAMI	NE COMPOSITIONS	OIPE	<b>\</b>	7
	the specif	ication of which (check o	only one item below):			·
		is attached hereto.	(8	JUL 0 7 2004	30	
	$\boxtimes$	was filed as United Sta	tes application	's a	<b>L</b> O	
		Serial No. <u>10/774,697</u>	-	4 DAVIENS	•	
		on <u>February 10, 2004</u>				
		and was amended				
		on (if applicable	).	•		
		was filed as PCT interr	ational application			
		Number			•	
		on,		•		
		and was amended unde	r PCT Article 19			
		on (if applicable	).			
	I hereby s amended	tate that I have reviewed by any amendment refer	and understand the conte	ents of the above	e-identified specification, inclu	iding the claims, as
	continuati	on-in-part applications, r	e information which is ma naterial information which iling date of the continuat	became available	bility as defined in 37 CFR § e between the filing date of the cation.	1.56, including for prior application and
	inventor's country of applicatio	or plant breeder's rights ther than the United State	certificate(s), or 365(a) o es of America, listed below plant breeder's rights cert	f any PCT intern  and have also it	r 365(b) of any foreign applicational application which des dentified below, by checking to PCT international application	ignated at least one he box, any foreign
PRI	OR FOREIGN	APPLICATION NUMBER(S)	COUNTRY		FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED
	<del></del>					
(27 (30 (50	7,969); Alan ),595); John	E.J. Branigan (20,565); J A. Sopp (33,103); Richa	ohn R. Moses (24,983); Ha d M. Lebovitz (37.067): Ja	rry B. Shubin (32 mes E. Ruland (3	(19,544); John L. White (17,74,004); Brion P. Heaney (32,542,7,432); Jennifer J. Branigan (40,000); Business in the Patent and Trad	2); Richard J. Traverso
Sei	nd Correspo	ndence to:Customer No. 2		hone No. 43-6333	Direct Telep Anthony	hone Calls to: J. Zelano
					<b>3,</b> ·	,
					•	
	•					

ATTORNEY'S DOCKET NUMBER
PHARMA-148

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1,	OF INVENTOR	COUCH	Richard	
2 0 1		CITY		Α.
	RESIDENCE & CITIZENSHIP	Chevy Chase	STATE OR FOREIGN COUNTRY  Maryland	COUNTRY OF CITIZENSHIP USA
	POST OFFICE	STREET	CITY ·	STATE & ZIP CODE/COUNTRY
ł	ADDRESS	5509 Center Street	Chevy Chase	Maryland, 20815, USA
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR	MICHAELS	Alex	DESCRIBE GIVEN WANTE
0		CITY		
2	RESIDENCE & CITIZENSHIP	-	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
-		Rockville STREET	Maryland	USA
-	POST OFFICE ADDRESS	Shire Pharmaceutical Development,	Rockville	STATE & ZIP CODE/COUNTRY
	ADDRESS	Inc.1801 Research Boulevard	Rockville	Maryland, 20850, USA
<u> </u>		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1	FULL NAME OF INVENTOR	HODGKINS	Paul	SECOND GIVEN NAME
2				
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
3	CITIZENSHIP	Mt. Airy	Maryland	USA
İ	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
L	ADDRESS	4022 Lomar Drive	Mt. Airy	Maryland, 21771, USA
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR		2	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COLDITAL OF CITIZENOVIA
4	CITIZENSHIP		STATE ON TOKELON COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	·		STATE WELL CODE COONTRI
			*	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	CITIZENSHIP			
	POST OFFICE	STREET	CITY .	STATE & ZIP CODE/COUNTRY
	ADDRESS			
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR			SECOND GIVEN NAME
0	DESIDENCE 8	CITY	STATE OR FOREIGN COUNTRY	
6	RESIDENCE & CITIZENSHIP		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ľ		CTD CT		
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
				·
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
7	CITIZENSHIP			
	POST OFFICE	STREET	СПУ	STATE & ZIP CODE/COUNTRY
	ADDRESS		· ·	
			1	<u></u>

ATTORNEY'S DOCKET NUMBER
PHARMA-148

2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 8	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	спу .	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1	RESIDENCE & CITIZENSHIP	СІТУ .	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 2	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
		·		1

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE 04.JUN.W	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE

	OMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY ncludes Reference to PCT International Applications)  ATTORNEY DOCKET NUMBER PHARMA-148				
As a below nam	ned inventor, I hereby de	clare that:			
My reside	nce, post office address	and citizenship are as state	d below next t	o my name.	į
				elow) or an original, first and joi	
ENANTIC	OMERIC AMPHETAMI	NE COMPOSITIONS	\0\F	E 30	
the specifi	ication of which (check	only one item below):		7 2004	
	is attached hereto.		JUL 0	<u>, mo č.</u>	
$\boxtimes$	was filed as United Sta	tes application	TRAI	well act.	
	Serial No. <u>10/774,697</u>	-	(3.4)	pr;~	
	on <u>February 10, 2004</u>			•	·
	and was amended				· ·
	on (if applicable	e).			
	was filed as PCT interr	national application			
	Number				
	on,				
	and was amended unde	er PCT Article 19			
	on (if applicable	e).			
I hereby s amended l	tate that I have reviewed by any amendment refer	d and understand the conterred to above.	nts of the abo	ve-identified specification, inclu	iding the claims, as
continuati	on-in-part applications,		became availa	tability as defined in 37 CFR § ble between the filing date of the plication.	
inventor's country of application	or plant breeder's rights her than the United State in for patent, inventor's o	certificate(s), or 365(a) of es of America, listed below	any PCT inte	or 365(b) of any foreign applicational application which des identified below, by checking to a PCT international application	ignated at least one he box, any foreign
PRIOR FOREIGN	APPLICATION NUMBER(S)	COUNTRY		FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED
(27,969); Alan (30,595); John	POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); James E. Ruland (37,432); Jennifer J. Branigan (40,921); Csaba Henter (50,908) and Nicole E. Kinsey (50,723) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.				
Send Correspo	ndence to:Customer No.		hone No. 43-6333	Direct Teler Anthony	hone Calls to: J. Zelano
					·
•					

ATTORNEY'S DOCKET NUMBER
PHARMA-148

	T	T. 1. CT V. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		T
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OI INVENTOR	COUCH	Richard	A.
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	Chevy Chase	Maryland	USA
		STREET		
	POST OFFICE ADDRESS	5509 Center Street	CITY ·	STATE & ZIP CODE/COUNTRY
	ADDRESS	330) Center Street	Chevy Chase	Maryland, 20815, USA
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
۱,	OF INVENTOR	MICHAELS	М.	Alex
2				
0 2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2	CITIZENSHIP	Bethesda	Maryland	Canada
	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	8619 Terrace Garden Way	Bethesda	Maryland, 20814, USA
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
١ , ا	OF INVENTOR	HODGKINS	Paul	
2		СПУ	STATE OR FOREIGN COUNTRY	COLD TED V OF CETTER NOVED
0	RESIDENCE & CITIZENSHIP			COUNTRY OF CITIZENSHIP
3		Mt. Airy	Maryland	USA
	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	4022 Lomar Drive	Mt. Airy	Maryland, 21771, USA
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
١.	OF INVENTOR			
2				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
4	CITIZENSHIP			
	POST OFFICE	STREET	СПҮ	STATE & ZIP CODE/COUNTRY
	ADDRESS		*	
<u> </u>	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
_	OF INVENTOR			DECOND GIVEN MAILE
2			·	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	CITIZENSHIP			
-	POST OFFICE	STREET	СПУ	STATE & ZIP CODE/COUNTRY
	ADDRESS			
$\vdash$		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1	FULL MAME OF INVENTOR	LAVID I WAVE	FIRST GIVEN NAME	SECOND GIVEN NAME
2		·		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	CITIZENSHIP			
	POST OFFICE	STREET	СПУ	STATE & ZIP CODE/COUNTRY
	ADDRESS			
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	OF INVENTOR			
2				
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
7				
	POST OFFICE	STREET	СПҮ	STATE & ZIP CODE/COUNTRY
	ADDRESS			
		L	<u> </u>	<del></del>

ATTORNEY'S DOCKET NUMBER PHARMA-148

2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 8	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТҮ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
9	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 1	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 2	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
		<u> </u>	<del></del>	1

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

<u> </u>		I	
SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 201	6/3/04	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
-			
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENȚOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE

COMBINED (Includes Refer	OMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY ncludes Reference to PCT International Applications)  ATTORNEY DOCKET NUMBER PHARMA-148				
	ned inventor, I hereby de				
My reside	nce, post office address	and citizenship are as stated below next	to my name.		
I believe I names are	am the original, first and listed below) of the sub	sole inventor (if only one name is listed b ject matter which is claimed and for whi	pelow) or an original, first and join ich a patent is sought on the inven	t inventor (if plural tion entitled:	
ENANTIO	OMERIC AMPHETAMI	NE COMPOSITIONS	Ē		
the specifi	ication of which (check	only one item below):	(C98)		
	is attached hereto.	JUL 07	2004 <u>j</u>		
$\boxtimes$	was filed as United Sta		of Ca.		
	Serial No. <u>10/774,697</u>	الله كل الله الله الله الله الله الله ال	rig.		
	on <u>February 10, 2004</u>				
	and was amended				
	on (if applicable	).		-	
	was filed as PCT interr	ational application			
	Number				
	on				
	and was amended unde	r PCT Article 19			
	on (if applicable	).			
I hereby s amended l	tate that I have reviewed by any amendment refer	and understand the contents of the abored to above.	ove-identified specification, include	ling the claims, as	
continuati	on-in-part applications, r	e information which is material to pater naterial information which became availa iling date of the continuation-in-part app	able between the filing date of the pr		
inventor's country of application	or plant breeder's rights her than the United State	nefits under 35 U.S.C. 119(a)-(d) or (f), certificate(s), or 365(a) of any PCT intess of America, listed below and have also plant breeder's rights certificate(s), or an hich priority is claimed.	ernational application which design identified below, by checking the	gnated at least one e box, any foreign	
PRIOR FOREIGN	APPLICATION NUMBER(S)	COUNTRY	FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED	
POWED OF A	TTORNEY. As a second	inventor I hersky omnint I William Mill	(10 544), John L. White (17 744	\(\text{\tint{\text{\tint{\text{\tin}\exiting{\text{\tin}}}\\ \tint{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\tin}\text{\text{\text{\text{\text{\text{\text{\text{	
(27,969); Alan (30,595); John	POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); James E. Ruland (37,432); Jennifer J. Branigan (40,921); Csaba Henter (50,908) and Nicole E. Kinsey (50,723) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.				
Send Correspo	ndence to:Customer No. 2	23599 Telephone No. 703/243-6333	Direct Teleph Anthony J.		
				(3)	
				i	

ATTORNEY'S DOCKET NUMBER
PHARMA-148

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR	COUCH	Richard	A.
0	RESIDENCE & CITIZENSHIP	CITY Chevy Chase	STATE OR FOREIGN COUNTRY Maryland	COUNTRY OF CITIZENSHIP USA
:	POST OFFICE ADDRESS	5509 Center Street	CITY Chevy Chase	STATE & ZIP CODE/COUNTRY Maryland, 20815, USA
2	FULL NAME OF INVENTOR	FAMILY NAME MICHAELS	FIRST GIVEN NAME Alex	SECOND GIVEN NAME
0 2	RESIDENCE & CITIZENSHIP	спу Rockville	STATE OR FOREIGN COUNTRY Maryland	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	Shire Pharmaceutical Development, Inc.1801 Research Boulevard	спу Rockville	STATE & ZIP CODE/COUNTRY Maryland, 20850, USA
2	FULL NAME OF INVENTOR	FAMILY NAME HODGKINS	FIRST GIVEN NAME Paul	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY Mt. Airy	STATE OR FOREIGN COUNTRY Maryland	COUNTRY OF CITIZENSHIP PH. /C. 123.04
	POST OFFICE ADDRESS	STREET 4022 Lomar Drive	Mt. Airy	STATE & ZIP CODE/COUNTRY Maryland, 21771, USA
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 5	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 6	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СТТҮ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 7	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY

ATTORNEY'S DOCKET NUMBER
PHARMA-148

2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 8	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY .	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 9	RESIDENCE & CITIZENSHIP	спу	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 2	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY.
		·	<u> </u>	L

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF ATVENTOR 203	DATE OS Tue 04	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE